

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number K50007246844	2. Page 1 of 1	3. Emergency Response Phone (800) 452-3718	4. Manifest Tracking Number 008037581 FLE			
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219 (316) 289-7400			Generator's Site Address (if different than mailing address) SAME					
6. Transporter 1 Company Name US Bulk Transportation Inc			U.S. EPA ID Number PA0987347515					
7. Transporter 2 Company Name			U.S. EPA ID Number					
8. Designated Facility Name and Site Address Clean Harbors Lone Mountain LLC 40355 S County Road 230 Wichita, KS 67220 (316) 657-3500			U.S. EPA ID Number OK0009438378					
Facility's Phone:								
GENERATOR	9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any)) HAZARDOUS WASTE, SOLID, N.O.S., (F001, F002, F003, F004, F005)	10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes	
			No.	Type				
	X	1. PG III	1	ST	EST 16	Y	F001 F002 F003 F004 F005	
		2.						
		3.						
	4.							
14. Special Handling Instructions and Additional Information 1. 10321502K05 2. 10321502K05								
TR# 573 TL# 573H								
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.								
Generator's/Officer's Printed/Typed Name Jim Tyson			Signature <i>Jim Tyson</i>			Month Day Year 2 9 15		
TRANSPORTER	16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: _____ Date leaving U.S.: _____							
	17. Transporter Acknowledgment of Receipt of Materials							
	Transporter 1 Printed/Typed Name James H. Hines			Signature <i>James H. Hines</i>			Month Day Year 2 9 15	
	Transporter 2 Printed/Typed Name			Signature			Month Day Year	
DESIGNATED FACILITY	18. Discrepancy							
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection							
	18b. Alternate Facility (or Generator) Manifest Reference Number: _____ U.S. EPA ID Number _____							
	Facility's Phone: _____							
	18c. Signature of Alternate Facility (or Generator) _____ Month Day Year							
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)								
1. RECY		2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a								
Printed/Typed Name			Signature			Month Day Year		

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number KSD007246846	2. Page 1 of 1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 008037581 FLE				
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219 (316) 266-7400			Generator's Site Address (if different than mailing address) SAME						
6. Transporter 1 Company Name U.S. Bulk Transportation Inc			U.S. EPA ID Number PA0987347515						
7. Transporter 2 Company Name			U.S. EPA ID Number						
8. Designated Facility Name and Site Address Clean Harbors Lone Mountain LLC 40388 S County Road 236 Wichita, OK 73260 (580) 697-3500			U.S. EPA ID Number OKD068498378						
Facility's Phone:									
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))		10. Containers		11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes		
			No.	Type					
	1. NA3077, HAZARDOUS WASTE, SOLID, N.O.S., (F001, F003), 9, PG III		1	ST	EST 16	Y	F001	F002	F003
							F004	F005	
14. Special Handling Instructions and Additional Information 1. CH831502X0B ER3#171 TR# 573 TL#S 73A									
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true.									
Generator's/Officer's Printed/Typed Name Jim Tyson			Signature Jim Tyson			Month Day Year 2 4 15			
16. International Shipments <input type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S.			Port of entry/exit: Date leaving U.S.:						
17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name James H. Wines									
Transporter 2 Printed/Typed Name			Signature			Month Day Year			
18. Discrepancy									
18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection									
18b. Alternate Facility (or Generator) U.S. EPA ID Number									
Facility's Phone:									
18c. Signature of Alternate Facility (or Generator) Month Day Year									
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems)									
1. H132			2.		3.		4.		
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a									
Printed/Typed Name Cindy Bradford			Signature Cindy Bradford			Month Day Year 2 4 15			